

Procedure: Issuance of Additional Benefits

Functional Area: IX Food Delivery

Section: B7 Approval Date: 6/2015 Citation: 246.12(I) Revised Date: 2/2010

Purpose

To provide guidance on when additional benefits can be given.

When Additional Benefits May Be Issued

Additional benefits may be given in the following circumstances:

- When formula needs change and formula has already been purchased and returned to the clinic
- When child is placed in foster care during a benefit period
- When custody of a child changes during a benefit period

Who May Authorize Replacement

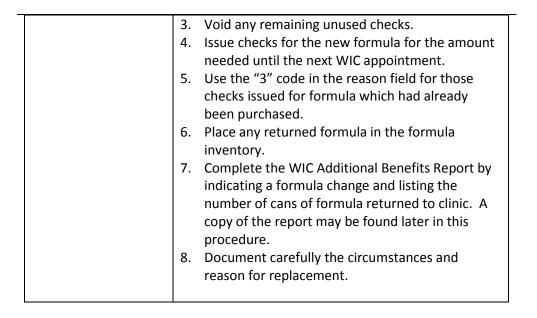
A CPA must authorize replacement checks for any formula changes or replacement.

Documenting Replacement Of Formula

When a client has a formula change after checks have been issued for that benefit period use the following chart to determine the action to take and how to document:

IF:	THEN:
All checks have been	1. Have client bring in any unused cans of formula.
redeemed	2. Issue replacement checks for the amount of formula appropriate from replacement date until
	the next appointment.
	3. Use the "3" code in the reason field for check issuance
	 Complete the WIC Additional Benefits Report by indicating a formula change and listing the number of cans returned to the clinic. There is an example of the report at the end of this procedure.
	5. Place returned formula in formula inventory, see procedure in Section I of this volume.
	6. Do not void any checks in this circumstance as they have already been redeemed.
	7. Document carefully the circumstances and reason for replacement.
Only some of the checks have been	Have client return all unused checks and formula to clinic.
redeemed.	2. To verify which checks have been redeemed, look up the status of the checks in the WIC computer system.

Documenting Replacement Of Formula (cont.)



Documenting Replacement Due To Placement In Foster Care

When a client is placed in foster care or has a change in custody during a benefit period use the following steps:

IF:	THEN:
They bring the checks that have already been issued for the benefit period to the clinic.	 Void each check returned in the computer. Reissue checks to the new guardian of the child based on the policy for Prescribing and Issuing Prorated Packages, Section B.
They are unable to bring the issued checks to clinic	 Reissue benefits to the new guardian depending on the amount of time before the next appointment. Use the policy for Prescribing and Issuing Prorated Packages, Section B of this Volume to determine the amount of benefits to issue. Complete an Additional Benefits Report by indicating foster care or custody change. List the check numbers that were issued and not returned. Describe the situation requiring replacement of benefits. Use the "3" code in the reason field for check issuance. Contact the previous responsible party by phone (if possible), and a follow-up letter (sample follows in this procedure) to request the return of unused checks. Contact State WIC Food Operations Coordinator for further follow-up actions.

Do Not Replace Checks When

Do not issue replacement checks if:

- WIC food benefits were lost in a natural disaster affecting large numbers of people.
 - o Refer these clients to emergency relief programs.
- There are less than seven calendar days until the client's next scheduled check pick-up.
- There is reasonable suspicion that the client is attempting to defraud the WIC Program. Contact the State WIC Food Operations Coordinator to discuss.

Nebraska WIC Program Additional Benefit Issuance Report

Client ID Number:	Family ID Number:	
Client last name:		
Client first name, Middle Initial:		
Benefits were reissued due to:	☐ Custody Change	☐ Formula Chang
□ F	oster Care Placeme	nt
Description of situation or event:		
Check Numbers	(List Individually	·)
Original Checks	Replacement Checks	
Date of Issue:——— (MM/YY)	Date of Issue:—	(MM/YY)
Participant Signature/Date	Authorized WIC St	taff Signature

Date
Responsible Party Name Address
Dear :
It has come to our attention that (minor's name(s)), is/are no longer in your custody or living in your household. You received checks for this/these child(ren) on (month, day, year). You may only receive WIC benefits for the child(ren) who is/are living with you.
Please do not use the following WIC checks for (child(ren)'s name(s)) that you have received, but not used as of (date). Use of these checks may result in sanction points being assigned to your file, a request to repay WIC the value of the checks, and/or termination from the program.
(List check numbers here)
Please return the unused checks to our WIC office by mail or bring them to your next WIC visit.
If you have any questions or would like to talk about the situation, please call me at (phone number)
Sincerely,
WIC Staff Person's Name
WIC is an equal opportunity program